

MAR 30 2005

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application No.	09/645,777
	Filing Date	August 25, 2000
	First Named Inventor	Houis et al.
	Group Art Unit	3679
	Examiner Name	Binda
	Attorney Docket No	206357

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

1. Submission required under 37 CFR 1.114 a. <input checked="" type="checkbox"/> Previously submitted i. <input checked="" type="checkbox"/> Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on March 2, 2005 (Any unentered amendment(s) referred to above will be entered.) ii. <input type="checkbox"/> Consider the arguments in the Appeal Brief or Reply Brief previously filed on iii. <input type="checkbox"/> Other: b. <input type="checkbox"/> Enclosed i. <input type="checkbox"/> Amendment/Reply ii. <input type="checkbox"/> Affidavit(s)/Declaration(s) iii. <input type="checkbox"/> Information Disclosure Statement (IDS) iv. <input type="checkbox"/> Form PTO-1449 v. <input type="checkbox"/> Copies of References listed in Form PTO-1449 (except for U.S. patents and applications) vi. <input type="checkbox"/> Other:								
2. Miscellaneous a. <input type="checkbox"/> Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; fee under 37 CFR 1.17(i) required.) b. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 c. <input type="checkbox"/> Other:								
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. a. <input checked="" type="checkbox"/> Please charge Deposit Account No. 12-1216 in the total amount indicated below. A duplicate copy of this transmittal sheet is enclosed herewith. i. <input checked="" type="checkbox"/> RCE fee of \$790.00 (large entity) required under 37 CFR 1.17(e) ii. <input type="checkbox"/> One-month extension of time fee of \$120.00 (37 CFR 1.136 and 1.17) iii. <input checked="" type="checkbox"/> Petition for an extension of time (including the period noted above, if checked), as well as for any additional period necessary to render the present submission timely. Please charge Deposit Account No. 12-1216 for the appropriate petition fee. iv. <input type="checkbox"/> Suspension of action fee of \$130.00 (37 CFR 1.17(i)) v. <input type="checkbox"/> Other: vi. <input type="checkbox"/> Claim fee								\$790.00
CLAIM FEE	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	EXTRA CLAIMS PRESENT	RATE	ADD'L CLAIM FEE	RATE	ADD'L CLAIM FEE
TOTAL		MINUS		=	x 25=	\$	x 50=	\$
INDEPENDENT		MINUS		=	x 100=	\$	x 200=	\$
<input type="checkbox"/>	FIRST PRESENTATION OF MULTIPLE CLAIM				+ 180=	\$	+ 360=	\$
Claim fee total								
Total amount to be charged to Deposit Account								\$790.00
b. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any deficiencies in the above fees or to credit any overpayments to Deposit Account No. 12-1216								

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